

Chapter Eight

Referral, Outreach & Coordination of Services

Policy

The State agency will prepare a written plan specifying the objectives, methods and evaluation of WIC outreach efforts. The plan will include coordination of activities between local agencies and outreach/referral agencies.

In this chapter

This chapter is divided into seven (7) sections which detail state and local agency responsibilities for outreach and referral as well as evaluation of outreach and mechanisms for health care coordination and one (1) appendix.

Section	Title	Page Number
A	Outreach – Overview	2
B	Outreach – State Agency Responsibilities	4
C	Outreach – Local Agency Responsibilities	6
D	Outreach – Evaluation	8
E	Referral – State Agency Responsibilities	9
F	Referral – Local Agency Responsibilities	11
G	Health Care Coordination	13
H	Immunization Screening & Referral	14
Appendix A	Forms	Appendix A

Chapter Eight

Referral, Outreach & Coordination of Services

Section A

Outreach – Overview

Procedure	All local agencies will develop outreach/referral procedures which comply with the State Agency's Outreach Plan.
Objectives of outreach	<p>The objectives of WIC outreach efforts are:</p> <ul style="list-style-type: none">• To inform eligible persons of the availability of the WIC Program including the eligibility criteria for participation and the location of WIC services;• To target outreach toward physicians/hospitals in order to increase enrollment of high risk participants;• To increase the number of migrants/agricultural workers enrolled in WIC.
Methods of outreach	<p>Agencies, offices and organizations (including minority organizations serving or having access to eligible persons) will be contacted at least annually.</p> <p>Brochures describing WIC services, eligibility criteria, and location of local agencies will be distributed to outreach agencies that serve or have access to WIC's target population.</p> <p>Outreach agencies include, but are not limited to: AHCCCS providers and private physicians, HIS facilities, dental services, EPSDT, family planning services, alcohol and drug abuse counseling agencies, child protective services, child abuse counseling agencies, immunization providers, prenatal and postnatal care providers, well child programs, CACFP providers, the Food Stamp Program, EFNEP, AFDC, SSI, hospitals and clinics, welfare and unemployment offices, schools, social service agencies, food banks, other food assistance programs (FDD, CSFP, FDPIR, etc.), homeless shelters, child support enforcement services, foster care agencies, farm worker and migrant/agricultural worker compensations, agencies who serve children with special health care needs, and religious community organizations in low-income areas.</p>

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Emphasis of outreach

Emphasis will be place on reaching potential participants who are:

- Migrant and agricultural workers;
 - Pregnant women, especially teens and women in the early months of pregnancy;
 - Recipients of AFDC or Food Stamps;
 - Participants in the Child and Adult Care Food Program (CACFP);
 - Women enrolled in substance abuse programs;
 - Persons enrolled in the Arizona Health Care Cost Containment System;
 - Minority and immigrant populations;
 - Homeless individuals; and
 - Infants and children under the care of foster parents, protective services and child welfare authorities.
-

Chapter Eight

Referral, Outreach & Coordination of Services

Section B

Outreach – State Agency Responsibilities

Outreach Team	An Outreach Team composed of State agency staff and local agency staff will meet at least quarterly to coordinate WIC program operations and to direct statewide outreach efforts.
Coordination with Anti-Hunger Groups	The State Agency will meet with and encourage local agency participation with hunger advocates, food bank representatives and others interested in supporting WIC. Staff will actively participate in the Statewide Hunger Council.
Announcement of WIC Services	The State agency will announce the availability of WIC services to the public annually using statewide media.
Development of materials	The State agency will obtain or develop outreach materials for distribution to local agencies to assist in their outreach efforts.
Guidelines for Outreach	<p>The Outreach Team will establish procedures and guidelines to assist local agencies in developing or expanding referral systems and outreach plans.</p> <p>State and local agency files of outreach agencies contacted will include (as applicable) agency name, address, phone number, hours, WIC eligibility requirements, contact person(s), service area, and services of each agency.</p> <p>Uniform WIC information materials announcing program benefits will include a program description, eligibility criteria, location of local projects, and non-discrimination statement.</p>

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Hotline

A bilingual “800” number (1-800-2525-WIC) will be maintained. The number allows potential or current participants to call the State agency directly to ask for assistance or voice a concern.

Monitoring local agency activity

The State agency will monitor outreach activities at each Management Evaluation.

Outreach Log

The State agency will maintain a file recording all statewide outreach activities. A suggested outreach log format is available from the State agency.

Chapter Eight

Referral, Outreach & Coordination of Services

Section C

Outreach – Local Agency Responsibilities

Outreach Plan	<p>Each local agency will prepare an outreach plan which will guide their outreach efforts. It will include:</p> <ul style="list-style-type: none">• How to identify high risk potential clients and plan targeting strategies;• A list of agencies to contact and a plan (including time frame and staff responsibilities) for these contacts;• A plan to improve access for employed persons and rural residents. Plans to specify what steps will be taken to provide convenient WIC services. Appointment scheduling, clinic hours, and clinic locations will each be addressed in the plans;• Those agencies that do not routinely schedule appointments outside of normal business hours will make appointments available for working persons seeking to participate in the WIC program;• An evaluation component which will include reporting outreach efforts in progress reports.
----------------------	--

Note: A suggested format for the outreach log follows on the next page.

Outreach Activities	<p>Each local agency will contact agencies, offices, and organizations (including minority organizations) serving or having access to eligible persons in the local service area annually. Each agency will be supplied with a description of WIC services, eligibility criteria, and location of local agency clinics.</p>
----------------------------	---

Announcement of WIC Service	<p>Each local agency will announce the availability of WIC services to the public annually, using media which will reach potential clients in their service area.</p>
------------------------------------	---

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Sample Outreach Log

Outreach Log FY ____

Date	Staff Name	Organization Contacted	Type of Contact	Result
1/6/96	Ima Great, CNW	Concordia Valley High School Attn: Joan Doe Phoenix, AZ 85000	Mailed Outreach packet	Potential to reach 100 pregnant and/or parenting teens.

Date = date outreach activity completed

Staff Name = staff member who did the outreach

Organization = person/group who received information

Type of contact = e.g., mailed information, radio interview, press release, public presentation, staffed booth at health fair

Result = e.g., potential number of clients reached, and the description of those clients.

Chapter Eight

Referral, Outreach & Coordination of Services

Section D

Outreach – Evaluation

The State and Local Agency files of outreach activities will be updated annually.

The NAPS Manager and the Local Agency WIC Director will evaluate the effectiveness of outreach efforts.

The Outreach Team will prepare an evaluation of statewide outreach activities annually.

Chapter Eight

Referral, Outreach & Coordination of Services

Section E

Referral – State Agency Responsibilities

The State agency will require and monitor local agencies to make available to all adults applying for themselves or on behalf of others information on the following programs:

AHCCCS and EPSDT

If individuals are not currently participating in AHCCCS, but appear to be eligible, the local agency will refer those individuals to AHCCCS. This will include referring infants and children to early and periodic screening, diagnostic, and treatment (EPSDT) services, and pregnant women for AHCCCS presumptive eligibility services.

Current AHCCCS income eligibility requirements are listed in Chapter 2.

Child Support and TANF

Child support and TANF

Food Stamps

The Food Stamp Program

Substance Abuse

Substance Abuse counseling/treatment programs.

Food Providers

Other nutrition or emergency food providers (e.g., CSFP, Food Banks, FDPIR.)

Immunizations

State and local immunization programs.

Head Start

State and local Head Start programs.

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

**Formal
Agreements**

The State Agency will develop a written formal agreement that permits the sharing of participant information with Maternal and Child Health Programs.

Contact Phones

The State agency will maintain a list of contact phone numbers for agencies providing services of use to WIC clients statewide. When inquiries are received on the 800 number, appropriate referrals will be made.

Chapter Eight

Referral, Outreach & Coordination of Services

Section F

Referral – Local Agency Responsibilities

Referral List

Each local agency will develop a list of services available locally. The list will be updated at least annually. This list will be similar to the list of agencies contacted for outreach.

At every certification all WIC participants will be given written referral information about AHCCCS, Food Stamp, TANF, and Child Support Enforcement, Substance Abuse Treatment and Counseling, as well as information about other nutrition or food providers. This referral list will include a description of benefits offered by each program.

Applicants who are found to be ineligible for WIC services or applicants who are placed on waiting lists will be given referrals to other appropriate services.

Child Support

At least annually, WIC participants will be informed of the availability of child support enforcement services.

Social/Health Services & Breastfeeding Support

WIC participants will be referred to appropriate services according to identified needs.

Participants will be referred to appropriate social or health services for suspected child neglect or abuse and suspected substance abuse.

Breastfeeding or pregnant participants will be referred to appropriate counselors or organizations for breastfeeding education and support.

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Criteria for high risk referrals

Local agencies should develop a plan for referring high risk clients internally and externally. The plan should outline the level of intervention and be submitted to the State Agency prior to implementation.

Example:

Internal Referral: Follow-up one-on-one counseling with RD, group ed., etc.

External Referral: CRS referral for PKU diagnosed child.

Chapter Eight

Referral, Outreach & Coordination of Services

Section G

Health Care Coordination

Outreach/referral agencies will be contracted annually to review referral and coordination procedures and to resolve identified problems.

The State agency will ensure that each local agency operation the WIC program within a hospital (or which has a cooperative arrangement with a hospital) will advise potentially eligible persons that receive inpatient or outpatient prenatal, maternity, or postpartum services, or those that accompany a child under the age of five (5) receives well-child services, of the availability of WIC services.

Chapter Eight

Referral, Outreach & Coordination of Services

Section H

Immunization Screening & Referral

Policy	This policy is to assure that children served by WIC are screened for immunization status and if needed, referred for immunizations. Arizona State WIC and local agencies must ensure that WIC infants and children are screened and referred for immunizations using documented immunization history.
Background	Low-income children are less likely to be immunized than their counterparts, placing them at high risk for potentially serious diseases, such as diphtheria, pertussis, poliomyelitis, measles, mumps, and rubella. According to the Centers for Disease Control and Prevention (CDC), children who are not fully immunized are at increased risk for other preventable conditions, such as anemia and lead toxicity.
WIC's Role	The Immunization program in each State is the lead agency in immunization planning and screening, and is responsible for design of immunization services, etc. As an adjunct to health services, the WIC Program's role in immunization screening and referral is to support existing funded immunization activities. WIC involvement in immunization screening and referral activities should be enhance rather than substitute for ongoing Immunization Program Initiatives. The purchase of vaccines and delivery of immunization remain unallowable costs to WIC.
Screening Timeline	At initial certification and all subsequent certification visits for children under the age of two (2) screen the infant/child's immunization status using a documented record.

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Documented Record

A record (computerized or paper) in which actual vaccination dates are recorded. This includes:

- A hand-held immunization record from the provider
 - An immunization registry
 - An automated data system
 - A client chart (paper copy).
-

Screening

At minimum, screen the infant/child's immunization status by counting the number of doses of DyaP (diphtheria and tetanus toxoids and acellular pertussis) vaccine they have received in relation to their age, according to the following table:

- By three months of age, the infant/child should have at least one dose of DTaP.
 - By five months of age, the infant/child should have at least two doses of DTaP.
 - By seven months of age, the infant/child should have at least three doses of DtaP
 - By nineteen months of age, the infant/child should have at least four doses of DTaP.
-

Under Immunized

Provide information on the recommended immunization schedule appropriate to the current age of the infant/child,

And

Provide referral for immunization services, ideally to the child's usual source of care.

Continued on next page

Chapter Eight

Referral, Outreach & Coordination of Services

Missing Immunization Record

1. Provide information on the recommended immunization schedule appropriate to the current age of the infant/child;
2. Provide referral for immunization services, ideally to the child's usual source of medical care;
3. Encourage the parent/caretaker to bring the immunization record to the next certification visit.

Documentation

Document specific action taken in AIM in the health history form.

Chapter Eight

Referral, Outreach, and Coordination of Service

Appendix A: Forms

Arizona WIC Program Referral Form- Pregnant, Postpartum, Breastfeeding Women

From:	To:
-------	-----

Name:_____ Birthdate:_____

☐ This is not my patient

Consent

I authorize the release of all medical information to the WIC Program.

Doy autorizacion que provean toda mi informacion medica al programa de WIC.

Signature/Firma_____ Date_____

Information Requested

EDD_____ **Date of Hgb/Hct**_____ **Results**_____

List of medical problems:

This pregnancy:_____

Problems during last 2 pregnancies (not including current):_____

Multiple gestation: _____ Yes _____ No Twins/Triplets: _____

Anticipated or actual C-section _____ Yes _____ No

Additional Information: _____

Personnel Providing Information:

Signature/Title

Date

Printed Name

Telephone

Arizona WIC Program Referral Form – Infant/Child

From:	To:
-------	-----

Name: _____ Birthdate: _____

☐ This is not my patient

Consent
I authorize the release of all medical information to the WIC Program.
<i>Doy autorizacion que provean toda mi informacion medica al programa de WIC.</i>
Signature/Firma _____ Date _____

Information Requested

Date _____ Current Wt. _____ Ht. _____ Hgb/Hct _____ Gestational Age _____

Number of Infections within last 12 months: _____

Medical Conditions

- | | |
|--|---|
| <input type="checkbox"/> Failure to thrive | <input type="checkbox"/> Surgery/Burns |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Muscular Dystrophy |
| <input type="checkbox"/> Cystic Fibrosis | <input type="checkbox"/> Other (describe below) |

Describe: _____

Formula Requested

- Formulas tried:** Specific Reactions _____
_____ Enfamil w/Iron _____
_____ Prosobee w/Iron _____
_____ Others _____
- Specific formula requested:** _____
- Medical reason** for formula: _____
- How long** client needs to stay on formula: _____
- Special Instructions** (concentration/rate/additional water): _____

Personnel providing information:

Signature/Title

Date

Printed Name

Telephone

INSTRUCTIONS
(WIC-9)

FROM: Agency initiating referral.

SENDER: Name and phone number of individual making referral.

TO: Agency, clinic or physician to which referral is being made.

ATTENTION: Specific person, division or clinic if known. Example: Rehabilitation Clinic, Division of Nursing, etc.

PATIENT/CLIENT INFORMATION: Including the following information, according to agency, when referrals are made:

Hospital, Nursing Home, Clinic, etc.

Brief pertinent history and diagnosis.
Nursing care problems and patient's/client's capabilities.
Current medication-dosage-time last dose given.
Allergies? Steroids?
Pertinent lab tests, X-ray, consultations.
Diet, medication or equipment supplied to the patient/client.
Length of time the patient/client has been known to the referring agency.

Public Health Agency

Please notify the agency early, before discharge from institution.
Diagnosis-Doctor's orders, including diet, formula, medications.
Special equipment needed- patient's/client's capabilities.
Nursing care problems.
Directional address, if necessary.

Social Agency or Mental Health Agency

Active or inactive case (with referring agency).
Please arrange an appointment with receiving agency.
List particular problems, behavior, information received which indicates need for referral.
Give as much background information as possible.

Voluntary Agency

Please list all agencies that have seen this person

Any Other Agency

Give that information which will be most pertinent to the receiving agency.

INSTRUCTIONS FOR REPORTING BACK: Include the following:

Patient's/Client's condition.
Care and Instructions given.
Home and family situation as it affects the patient/client.

WOMEN
INFANTS
CHILDREN

WIC
works...
let
us
help!



What is WIC?

WIC is a nutrition education program. WIC provides supplemental foods which promote good health & enjoyment, breastfeeding and pregnant women, infants and children up to age five.

Who is eligible?

- Pregnant women
- Breastfeeding women
- Women who have a baby less than six months old
- Infants and children up to five years old who:
 - live in this county
 - are at nutritional risk
 - meet our blood income guidelines

WIC services
are free!



How do you get WIC?

1. Make an appointment at a WIC clinic.
2. Talk with a WIC health professional at your appointment.
3. If eligible, you will be given complete nutrition facts.
4. You will be given a list of grocery stores where you can shop to exchange your coupons for WIC approved foods.



Benefits of being enrolled in the WIC Program!

1. You get nutritious foods at no cost.
2. You receive nutrition counseling for yourself and your children.
3. You save money. The extra money can be used to purchase health care, cigarettes, meals, baby food and other food that WIC does not provide.



WIC will provide:

- Nutrition education
- Referrals for health care
- Supplemental foods like these:



Where can you get WIC?

WIC has several offices in this area. Call the number on the back panel for locations and more information.

Good nutrition, starting with pregnancy, will provide the best possible start for babies and children to grow up strong and healthy.

